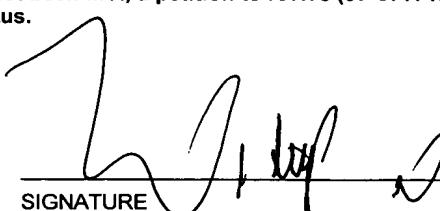
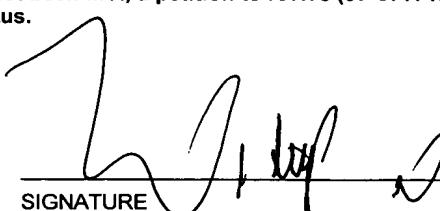
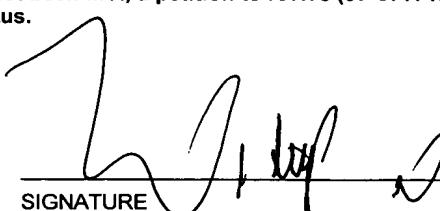


| | | | | |
|---|---|---|--|---|
| Substitute for Form PTO-1390 | | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | | ATTORNEY'S DOCKET NUMBER 022702-148 |
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | | | U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/562048 |
| INTERNATIONAL APPLICATION NO. PCT/FR 2004/001423 | INTERNATIONAL FILING DATE June 9, 2004 | PRIORITY DATE CLAIMED June 27, 2003 | | |
| TITLE OF INVENTION SINGLE-COMPONENT POLYORGANOSILOXANE COMPOSITION WHICH CROSSLINKS INTO A SILICONE ELASTOMER (as amended) | | | | |
| APPLICANT(S) FOR DO/EO/US Marc CHAUSSADE and Christiane PREBET | | | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | | | |
| <ol style="list-style-type: none"> <input checked="" type="checkbox"/> This is a FIRST submission to items concerning a filing under 35 U.S.C. 371. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (22) indicated below. <input type="checkbox"/> The US has been elected by the expiration of 19 months from the priority date (Article 31). <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)) <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <ol style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)). <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). | | | | |
| Items 11 to 21 below concern document(s) or information included: | | | | |
| <ol style="list-style-type: none"> <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. <input checked="" type="checkbox"/> A FIRST preliminary amendment. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment. <input type="checkbox"/> A substitute specification. <input type="checkbox"/> A change of power of attorney and/or address letter. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 C.F.R. 1.821 - 1.825. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4). <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4). <input checked="" type="checkbox"/> Other items or information: <u>Unexecuted Declaration; International Search Report corresponding to PCT/FR 2004/001423, issued on December 3, 2004 - 4 page; Forms PCT/IB/308 and 311; cited references</u> | | | | |

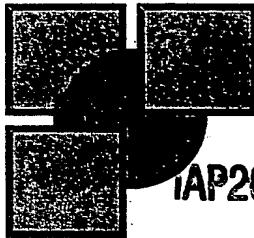
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------------|--|-------------------------------|---|--|--------|--------------|--------------|------|----|--------------|----|-------|---|--------------------------|--------------------|---|-------|---|---------------------------|---|--|--|-------------------|-----------|-----------------|--|--|-------------------|-----------|------------|--|--|-------------------|-----------|--|--|--|--|---------|--|--|--|-------------------------------|-------------|--|--|--|-----------|--|--|--|--|------------|-------------|---|--|--|--|---------|--|--|--|----------------------|-------------|---|--|--|--|---------|--|--|--|-----------------------|-------------|--|--|--|-------------------------|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|--|--------|-------------------|------|------------------|--|--|--|--|
| U.S. APPLICATION NO. (If known, see 37 CFR 1.5) | INTERNATIONAL APPLICATION NO. | ATTORNEY'S DOCKET NUMBER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 107562048 | PCT/FR 2004/001423 | 022702-148 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>21. <input checked="" type="checkbox"/> Applicant(s) requests that the published application include the following assignment information: <u>RHODIA CHIMIE 26, RUE ALPHONSE LE GALLO F-92512 BOULOGNE-BILLANCOURT CEDEX FRANCE</u></p> | | CALCULATIONS PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>22. <input checked="" type="checkbox"/> The following fees are submitted:</p> <table border="1"> <tr> <td>Basic Filing Fee (1631)</td> <td>\$ 300.00</td> </tr> <tr> <td colspan="2">Surcharge of \$130.00 (1617) for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e))</td> </tr> <tr> <td>CLAIMS</td> <td>NUMBER FILED</td> <td>NUMBER EXTRA</td> <td>RATE</td> <td>\$</td> </tr> <tr> <td>Total Claims</td> <td>17</td> <td>-20 =</td> <td>0</td> <td>x \$50.00 (1615) \$ 0.00</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>- 3 =</td> <td>0</td> <td>x \$200.00 (1614) \$ 0.00</td> </tr> <tr> <td colspan="2">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td></td> <td>+ \$360.00 (1616)</td> <td>\$ 360.00</td> </tr> <tr> <td colspan="2">Examination Fee</td> <td></td> <td>+ \$200.00 (1633)</td> <td>\$ 200.00</td> </tr> <tr> <td colspan="2">Search Fee</td> <td></td> <td>+ \$400.00 (1632)</td> <td>\$ 400.00</td> </tr> <tr> <td colspan="2">App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets)</td> <td></td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>TOTAL OF ABOVE CALCULATIONS =</td> <td>\$ 1,260.00</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.</td> <td></td> <td>+ \$ 0.00</td> <td></td> </tr> <tr> <td colspan="2"></td> <td></td> <td>SUBTOTAL =</td> <td>\$ 1,260.00</td> </tr> <tr> <td colspan="2">Processing fee of \$130.00 (1618) for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</td> <td></td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>TOTAL NATIONAL FEE =</td> <td>\$ 1,260.00</td> </tr> <tr> <td colspan="2">Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 (8021) per property +</td> <td></td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>TOTAL FEES ENCLOSED =</td> <td>\$ 1,260.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>Amount to be refunded :</td> <td></td> </tr> <tr> <td colspan="2"></td> <td></td> <td>charged :</td> <td></td> </tr> <tr> <td colspan="5"> <p>a. <input checked="" type="checkbox"/> A check in the amount of <u>\$ 1,260.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>02-4800</u> in the amount of _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-4800</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Charge _____ to credit card. Form PTO-2038 is attached.</p> </td> </tr> <tr> <td colspan="5"> <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p> </td> </tr> <tr> <td colspan="2">SEND ALL CORRESPONDENCE TO:</td> <td colspan="3">  SIGNATURE NORMAN H. STEPNO NAME </td> </tr> <tr> <td colspan="2"></td> <td>22,716</td> <td>DECEMBER 23, 2005</td> <td>DATE</td> </tr> <tr> <td colspan="2">REGISTRATION NO.</td> <td colspan="3"></td> </tr> </table> | | Basic Filing Fee (1631) | \$ 300.00 | Surcharge of \$130.00 (1617) for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)) | | CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | \$ | Total Claims | 17 | -20 = | 0 | x \$50.00 (1615) \$ 0.00 | Independent Claims | 1 | - 3 = | 0 | x \$200.00 (1614) \$ 0.00 | MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | + \$360.00 (1616) | \$ 360.00 | Examination Fee | | | + \$200.00 (1633) | \$ 200.00 | Search Fee | | | + \$400.00 (1632) | \$ 400.00 | App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets) | | | | \$ 0.00 | | | | TOTAL OF ABOVE CALCULATIONS = | \$ 1,260.00 | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | + \$ 0.00 | | | | | SUBTOTAL = | \$ 1,260.00 | Processing fee of \$130.00 (1618) for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | \$ 0.00 | | | | TOTAL NATIONAL FEE = | \$ 1,260.00 | Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 (8021) per property + | | | | \$ 0.00 | | | | TOTAL FEES ENCLOSED = | \$ 1,260.00 | | | | Amount to be refunded : | | | | | charged : | | <p>a. <input checked="" type="checkbox"/> A check in the amount of <u>\$ 1,260.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>02-4800</u> in the amount of _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-4800</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Charge _____ to credit card. Form PTO-2038 is attached.</p> | | | | | <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p> | | | | | SEND ALL CORRESPONDENCE TO: | |  SIGNATURE NORMAN H. STEPNO NAME | | | | | 22,716 | DECEMBER 23, 2005 | DATE | REGISTRATION NO. | | | | |
| Basic Filing Fee (1631) | \$ 300.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge of \$130.00 (1617) for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 17 | -20 = | 0 | x \$50.00 (1615) \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | 1 | - 3 = | 0 | x \$200.00 (1614) \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | + \$360.00 (1616) | \$ 360.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Examination Fee | | | + \$200.00 (1633) | \$ 200.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Search Fee | | | + \$400.00 (1632) | \$ 400.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets) | | | | \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | TOTAL OF ABOVE CALCULATIONS = | \$ 1,260.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | + \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | SUBTOTAL = | \$ 1,260.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Processing fee of \$130.00 (1618) for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | TOTAL NATIONAL FEE = | \$ 1,260.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 (8021) per property + | | | | \$ 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | TOTAL FEES ENCLOSED = | \$ 1,260.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Amount to be refunded : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | charged : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>a. <input checked="" type="checkbox"/> A check in the amount of <u>\$ 1,260.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>02-4800</u> in the amount of _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-4800</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Charge _____ to credit card. Form PTO-2038 is attached.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEND ALL CORRESPONDENCE TO: | |  SIGNATURE NORMAN H. STEPNO NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 22,716 | DECEMBER 23, 2005 | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REGISTRATION NO. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

REÇU 12 DEC 2005

10/562048

SIL
RWS GROUP

Translation Division
Europa House
Marsham House
Gerrards Cross
Bucks
SL9 8BQ
England



Tel: +44 (0)1753 480 200
Fax: +44 (0)1753 480 280
E-mail: rws@rws.com
Web: www.rws.com

IAP20 REC'D 23 DEC 2005
A member of the RWS Group of
Companies with offices worldwide

With Compliments

FAO: Sylviane Mynzalink

zu Händen von:

A l'attention de:

Your reference: CV/R03089-WO/05-5325 (PCT)

Ihr Zeichen:

Votre référence

Dept:

Abteilung:

Dépt:

If you are unable to contact us for whatever reason on our usual numbers, please use the following numbers instead, which will also be available in the case of emergency:

Phone: 0044 (0)78 3597 5107

Fax: 0044 (0)1753 277 204



THE QUEEN'S AWARDS
FOR ENTERPRISE:
INTERNATIONAL TRADE
2004

